

Presbytery of the James
Temporary Pastoral Relationships Covenant Form
 To Be Completed by the Session

On this date,		For the		Church, in		, Virginia,
---------------	--	---------	--	------------	--	-------------

Recommends that these terms of call be approved for	
---	--

The effective date is from		to	
----------------------------	--	----	--

Check all that apply:	Full-time		Part-time		If part-time, how many hours?		
	Bridge Pastor		Covenant Pastor				

The church will pay moving expenses up to	\$
---	----

The church will annually review the adequacy of compensation and follow the presbytery's compensation guidelines. If this is a part-time covenant, Board of Pension dues are applicable at 20 hours or above.

Compensation					
Total Annual Cash Equivalent:	\$		Full-time Compensation + Benefits must be at least \$72,000 and prorated for Part-Time		
A. With Housing and Utilities		B. With Manse, No Utilities Provided		C. With Manse & Utilities	
Annual cash salary:	\$	Annual cash salary:	\$	Annual cash salary:	\$
Housing/Util allow:	\$	Manse value:	\$	Manse value:	\$
		Util/furnishing allow:	\$	Utilities are provided:	Yes
Benefits					
D. Self-employment tax (.0765 X total cash equivalent):			\$		
E. Pension & Major Medical dues; see BoP Choice:			\$		
F. Study Leave (2 weeks minimum)					
G. Vacation (4 weeks minimum)					
Professional Reimbursements					
H. Auto/travel expenses (IRS rate)			\$		
I. Study leave expenses (presbytery minimum \$1,000)			\$		
Other (please specify, e.g., compensation, benefits, reimbursement)					
			\$		

DUTIES	

Terms: It is agreed that this covenant may be terminated upon a minimum of 30 days' written notice by either the minister or by the Session.

Boundary Training: The Presbytery of the James (POJ) requires boundary training to be current and renewed every three years for all minister members and those serving in a temporary pastoral relationship with a (POJ) congregation is subject to this requirement. *"By signing this covenant, I acknowledge the presbytery boundary training requirement. I agree to abide by the presbytery boundary training policy."*

Signatures			
Clerk of Session:		Date:	
Pastor:		Date:	
COM Approval:		Date:	

Please send this completed document to com@presbyteryofthejames.org

Revised: 9/15/25